

# LAKE PARK GOLF COURSE

EST 1963

## LAKE PARK GOLF COURSE MEMBERSHIP

1015 Howard Avenue • Des Plaines, IL 60018 • P: 847-391-5730 • DPParks.org

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Annual Membership  \$450 Residents Save \$! Adults  \$400 Seniors, 60 years and older, and Youth, 17 and younger  \$350

Valid for 1 full year from date of purchase. Proof of residency is required.

Member's Name	Male/Female	Date of Birth	Total of Membership Fees
The Des Plaines Park District reserves the right to change payment to reflect the correct fee.			\$ _____

1. Only one registration form per Household or Couple, please.
2. Proof of residency is required.
3. Please read and sign the Waiver/ Warning of Risk below. A parent or guardian must sign for any participant who is under 18. Signed waivers remain on file at the Park District offices.

Check No. \_\_\_\_\_

Credit Card (Check one):  Visa  MasterCard  Discover Card No. (last four digits only)     Exp. Date \_\_\_\_/\_\_\_\_      
MM / YY CVV (Back of card)

Cardholder Name \_\_\_\_\_ Signature \_\_\_\_\_  
Please print

### Warning of Risk/Release and Hold Harmless Waiver

Please read this form carefully and be aware that in signing up and participating in this program(s), you will be waiving and releasing all claims for injuries you might sustain arising out of this program. As a participant in the program(s), I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of injuries, damages or loss which I may sustain as a result of participating in any and all activities with or associated with such program(s). I agree to waive and relinquish all claims that I may have as a result of participating in the program(s) against the Des Plaines Park District (DPPD) and its officers, agents, servants and employees. I do hereby release and discharge the DPPD and its officers, agents, servants, and employees from any and all claims from injuries, damage, or loss which may accrue to me on account of my participation in the program(s), including transportation services and vehicle operations, when provided. I further agree to indemnify and hold harmless and defend the DPPD and its officers, agents, servants, and employees from any and all claims resulting from injuries, damages, and losses sustained by me and arising out of, connected with, or in any way associated with the activities of the program(s). I grant permission to the DPPD to photograph and/or video tape me, my child, or my ward at Park District facilities, classes and events, and to use such photos and videos on its website and in other online or printed publications without further consideration, and I acknowledge DPPD's right to crop or treat the photograph at its discretion. I acknowledge that DPPD may choose not to use my photo at this time, but may do so at its own discretion at a later date. I also understand that once my image is posted on DPPD's website and other websites, the image can be downloaded by any computer. Therefore, I agree to indemnify and hold DPPD harmless from any claims. DPPD reserves the right to discontinue use of photos without notice. I have read and fully understand the above Program Details and Waiver and Release of all Claims. Participant(s) or their legal guardian must sign this Waiver. The District will consider a facsimile signature as original. **Lake Park is a Spikeless Course.** Due to the excessive amount of damage done to putting surfaces, no shoes with golf spikes are allowed on this course. **Dress Code:** All golfers are required to wear shirts and shoes on the course and in the clubhouse. **Leagues:** Call 847-391-5730 for more information on Men's, Women's, and Junior leagues. All golfers are liable for their actions while on the golf course.

Member's Name \_\_\_\_\_ Signature \_\_\_\_\_  
Please print If over 18

Guardian's Signature for Participants under 18 year of age \_\_\_\_\_